uncer the Paperwork Reduction Act of 1885, no persons are required to respond to a collection of information unless it displays a valid OMB control nu PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR (Column 1) (Column 2) SMALL ENTITY **NUMBER FILED** FOR **NUMBER EXTRA** RATE FEE RATE BASIC FEE (37 CFR 1.16(a)) OR **TOTAL CLAIMS** (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1,16(b)) minus 3 = X \$ OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) + 5 OR \* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) (Column 1) SMALL ENTITY SMALL ENTITY **CLAIMS** HIGHEST **PRESENT** REMAINING RATE NUMBER ADDI-RATE JGA AMENDMENT PREVIOUSLY **AFTER EXTRA** TIONAL TION **AMENDMENT** PAID FOR FEE FE Total Minus 20 (37 CFR 1.16(c)) X \$ OR Independent Minus X \$ X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) **CLAIMS HIGHEST**  $\omega$ **PRESENT** REMAINING NUMBER RATE ADDI-**RATE** ADC AMENDMENT **AFTER PREVIOUSLY EXTRA** TIONAL TION **AMENDMENT** PAID FOR FEE FEL Total Minus (37 CFR 1.16(c)) X \$ OR Independent Minus (37 CFR 1.16(b)) X \$ X S OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d)) OR = TOTAL TOTAL ADD'L FEE OR ADD'L FEE

				•		
		(Column 1)		(Column 2)	(Column 3)	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total (37 CFR 1.16(c))		Minus	••	=	
	Independent (37 CFR 1.16(b))	•	Minus	•••	=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					

		_		
RATE	ADDI- TIONAL FEE		RATE	ADC TION FEI
x \$=		OR	× \$=	
× \$ =		OR	x \$=	
+ \$ =	"	OR	+ \$ =	
TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

<sup>•</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

<sup>&</sup>quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1